

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION | <i>am</i> | | 1/3/00 |
| O.I.P.E. CLASSIFIER | | | 1/12/00 |
| FORMALITY REVIEW | CM | 71632 | 8/18/00 |
| RESPONSE FORMALITY REVIEW | CM | 71632 | 9/18/00 |

INDEX OF CLAIMS

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| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | Canceled | A | Appeal |
| : | Restricted | O | Objected |

| Claim | Date | Claim | Date | Claim | Date |
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